

CATEGORY: SM.4 SPECIAL MISSIONS

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Area SM.4.1 Area Dental Laboratory (ADL)

Element SM.4.1.1 (formerly OPS.8.6.1)

Area Dental Laboratory (ADL) Support of Clinical Requirements

Evaluation Criteria

- Provided comprehensive laboratory services to USAF and other federal facilities within existing resources
 - Provided consultative and continuing education support to base laboratories
 - Conducted workshops for dentists and technicians within area of support
 - Published prostheses fabrication timelines for clinic use to facilitate patient scheduling; changes in ADL capabilities/timelines were coordinated with customers
 - Addressed the educational and technical needs of laboratory technicians
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Scoring

- 4: Criteria met.
- 3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.
- 2: Significant deficiencies existed in the ADL's support of base dental laboratories, such as inadequate training and education services or departures from published fabrication timelines. Program outcomes may be adversely affected.
- 1: Few criteria met. ADL services were limited and/or education and training services were largely non-existent. Adverse mission impact was likely to occur.
- 0: Criteria not met. ADL failed to meet minimum provisions of the element. Productivity and timeliness did not meet the minimum needs of customers. Adverse mission impact occurred or was highly likely to occur.

NA: Not scored.

Protocol

Dental Protocol 7 is the pertinent protocol for this element.

Inspector Contact

For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty dental inspector.

Reference(s)

AFI 47-101, Chap 7

Element SM.4.1.2 (formerly OPS.8.6.2)

Area Dental Laboratory (ADL) Documentation and Quality Control

Evaluation Criteria	<ul style="list-style-type: none">- Published and distributed laboratory information/newsletters to customers- Accurately documented safekeeping, use/turn-in of precious metals/alloys- Used data from monitoring laboratory functions to improve quality and timeliness of laboratory products- Quality control analysis was used to design continuing education program(s) for base dental laboratory technicians and to support professional needs of laboratory staff to include the following:<ul style="list-style-type: none">-- Analyzed local laboratory quality control forms-- Analyzed quality control feedback from customers- A quality review of productivity data was completed to ensure Dental Service Report accuracy
Scoring	<p>4: Criteria met.</p> <p>3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.</p> <p>2: Significant deficiencies existed in ADL quality control, such as inconsistent quality control analysis or quality control programs that were not effective in identifying training needs of laboratory personnel. Program outcomes may be adversely affected.</p> <p>1: Few criteria met. Discrepancies in the safekeeping, inventory and documentation of precious metals affected the security of resources, or there was no effective program to assess the quality of products or training needs. Adverse mission impact was likely to occur.</p> <p>0: Criteria not met. The ADL failed to meet the minimum provisions of the element. Quality did not meet the needs of customers. Adverse mission impact occurred or was highly likely to occur.</p> <p>NA: Not scored.</p>
Protocol	Dental Protocol 7 is the pertinent protocol for this element.
Inspector Contact	For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty dental inspector.
Reference(s)	AFI 47-101

Area SM.4.2 Educational and Developmental Intervention Services (EDIS)

Element SM.4.2.1 (formerly OPS.7.4.1)

EDIS Child Find

**Evaluation
Criteria**

- Child Find marketed EDIS in the school, clinic and community (e.g., base publications, bulletin board materials, newspaper or posters)
 - A clear plan (e.g., flow sheet, outline or talking paper) existed for the identification and screening of children (e.g., how parents access the EDIS system, how medical staff screen children and refer parents to EDIS and how the EDIS system ensures children are fully evaluated)
 - Providers and parents could identify the outcomes of a referral via Child Find (e.g., identification, screening, formal evaluation and intervention plan)
 - Medical staff in flight medicine, primary care and family practice could demonstrate the use of screening tools for well baby checks and physicals
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Scoring

- 4: Criteria met.
- 3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.
- 2: Some, but not all criteria met. Program outcomes may be adversely affected. For example:
- Child Find activities were occasionally neglected, resulting in decreased referrals
- 1: Few criteria met. Adverse mission impact was expected to occur. For example:
- Child Find was not introduced in the Integrated Delivery System
 - Few efforts were made to identify children in the community who might be in need of early intervention services, special education or related services
 - MTF personnel could not identify the EDIS Clinic
- 0: The medical unit failed to meet the minimum provisions of the element. Adverse mission impact occurred or was highly likely to occur.

NA: Not scored.

Protocol	Behavioral Health Protocol 3 is the pertinent protocol for this element.
Inspector Contact	For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty behavioral health inspector.
Reference(s)	DoDI 1342.12, 12 Mar 96; 32 CFR Part 80 (Title 32, Volume 1, Revised 1 Jul 99); ASD (FMP) memorandum, Monitoring the Provision of Early Intervention, Special Education and Related Services at Domestic and Overseas Locations, Standard 1, 12 Apr 98; 2003 Comprehensive Accreditation Manual for Behavioral Health Care, JCAHO
Bases	*EDIS sites: Medically Related Services and Early Intervention Services at Aviano AB, Lajes AB, RAF Alconbury/Upwood Clinic, RAF Lakenheath, Spangdahlem AB and Incirlik AB. Early Intervention Services at Robins AFB and Maxwell AFB.

Element SM.4.2.2 (formerly OPS.7.4.2 and OPS.7.4.3)

EDIS Assessment and Evaluation for Early Intervention Services (EIS) and Medically Related Services (MRS)

Evaluation Criteria

Early Intervention Services (EIS):

- Comprehensive psychosocial and physical health assessments were performed on intake
- Physical pain and nutritional risk assessments were documented IAW medical group instructions
- EDIS assessment plan, located in EDIS record, addressed all areas related to the suspected disabilities
- Documentation of auditory and visual acuity testing is apparent in the EDIS record
- EIS assessments included norm-referenced assessments in all five of the following developmental areas: cognitive, physical, communication, social/emotional and adaptive/self-help
- In the absence of norm-referenced assessments in all of the five developmental domains, documentation indicates that the child has a diagnosed physical or mental condition with high probability in developmental delay
- A child's strengths and needs were assessed and documented (EIS documentation indicates what the family would like to have happen for their child)
- Parents participated in meetings to plan the evaluation and gave their written permission prior to administration of any EDIS assessment
- Providers administering assessments were aware of the multidisciplinary team's assessment plan prior to assessment (e.g., what tests or observations were to be performed and the providers performing the assessments)
- Documentation identified that the synthesis of assessment information by a multidisciplinary team was used to type and quantify the child's disability and determine eligibility to receive EIS or special education and related services

Medically Related Services (MRS):

- Comprehensive psychosocial and physical health assessments were performed on intake
- Physical pain and nutritional risk assessments were documented IAW medical group instructions
- EDIS assessment plan, located in EDIS record, addressed all areas related to the suspected disabilities
- Testing for auditory and visual acuity is documented in the EDIS records
- In the absence of norm-referenced assessments, documentation indicates that the child has a diagnosed physical or mental condition with high probability of developmental delay
- A child's strengths and needs were assessed and documented

- Parents participated in meetings to plan the evaluation and gave their written permission prior to administration of any assessments
- Providers administering assessments were aware of the multidisciplinary team's assessment plan prior to assessment (e.g., what tests or observations were to be performed and the providers performing the assessments)
- Documentation identified that the synthesis of assessment information by a multi-disciplinary team was used to type and quantify the child's disability

Assessment and Evaluation Materials:

- Materials were current and validated for the specific purpose for which they are used or intended to be used
 - Assessments selected were appropriate to the age of the child
 - Providers have received appropriate training on the assessment tools
 - Materials and evaluation procedures are racially and culturally nondiscriminatory
 - If possible, assessments were administered in the primary language or mode of communication of the child
 - Assessment results were documented
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Scoring

- 4: Criteria met.
- 3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.
- 2: Some, but not all criteria were met. Program outcomes may be adversely affected. For example, EIS did not address or document all five areas (cognitive, social/emotional, adaptive/self-help, communication and physical) in the developmental assessment. Assessment instruments were not current.
- 1: Few criteria met. Adverse mission impact was expected to occur. For example:
 - Parental participation was not evident and permission was not obtained prior to assessment and/or evaluation
 - The absence of assessment information prevented the development or updating of individualized plans or not every child who was referred received a full and comprehensive diagnostic evaluation
 - Initial assessments did not include:
 - Screening for physical pain IAW the MTF's established criteria (for example, the Riley Infant Pain Assessment and/or documentation of observed behaviors associated with an infant's or child's pain)
 - Documentation regarding a patient's nutritional risk assessment IAW the MTFs established criteria for weight loss, weight gain, risk for nutritional harm and appropriate referral and consultation results

- Assessments were not selected or administered to reflect the needs of the child or requirements of the evaluation
- No evidence existed of a multidisciplinary team synthesizing the assessment information to determine a child's disability, the type or extent of disability or eligibility for services

0: The medical unit failed to meet the minimum provisions of the element. Adverse mission impact occurred or was highly likely to occur.

NA: Not scored.

Protocol	Behavioral Health Protocol 3 is the pertinent protocol for this element.
Inspector Contact	For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty behavioral health inspector.
Reference(s)	DoDI 1342.12, 12 Mar 96; 32 CFR Part 80 (Title 32, Volume 1, Revised 1 Jul 99); ASD (FMP) memorandum, Monitoring the Provision of Early Intervention, Special Education and Related Services at Domestic and Overseas Locations, Standards 2, 3, and 4, 2 Apr 98; 2003 Comprehensive Accreditation Manual for Behavioral Health Care, JCAHO
Bases	*EDIS sites: Medically Related Services and Early Intervention Services at Aviano AB, Lajes AB, RAF Alconbury/Upwood Clinic, RAF Lakenheath, Spangdahlem AB and Incirlik AB. Early Intervention Services at Robins AFB and Maxwell AFB.

Element SM.4.2.3 (formerly OPS.7.4.4)

EDIS Eligibility Report

Evaluation Criteria

Early Intervention Services (EIS):

- All children receiving EIS were determined eligible by the EDIS multidisciplinary team (which included the parent[s] or guardian[s])
- Eligibility was determined by a multidisciplinary committee before services were implemented
- Written eligibility reports synthesized all findings that addressed the strengths and needs relating to the child's disability
- A statement of the child's present level of performance was included in the written eligibility report
- Parents participated in the eligibility process as evidenced with meeting invitations and signatures on meeting and report forms
- Eligibility reports contained a statement indicating if the child was eligible for EIS and the criteria under which the child was determined eligible

Medically Related Services (MRS):

- All children receiving MRS from EDIS were qualified for special education services by the case study committee, as noted in the eligibility report
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Scoring

- 4: Criteria met.
- 3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.
- 2: Some, but not all criteria met. Program outcomes may be adversely affected. For example, not all multidisciplinary team members completed eligibility reports.
- 1: Few criteria met. Adverse mission impact was expected to occur. For example:
 - Parental participation was not evident
 - A substantial number of areas were not addressed (e.g., no descriptions of educational areas affected by the disability were noted and no information existed regarding the child's present level of performance)
 - The documentation of interviews in which family rights were discussed was absent from records or signatures were not obtained on documentation verifying parental review of family rights
- 0: The medical unit failed to meet the minimum provisions of the element. Adverse mission impact occurred or was highly likely to occur.

NA: Not scored.

Protocol Behavioral Health Protocol 3 is the pertinent protocol for this element.

Inspector Contact For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty behavioral health inspector.

Reference(s) DoDI 1342.12, 12 Mar 96; 32 CFR Part 80 (Title 32, Volume 1, Revised 1 Jul 99); ASD (FMP) memorandum, Monitoring the Provision of Early Intervention, Special Education and Related Services at Domestic and Overseas Locations, Standards 5, 6, 10 to 13, 2 Apr 98; 2003 Comprehensive Accreditation Manual for Behavioral Health Care, JCAHO

Bases *EDIS sites: Medically Related Services and Early Intervention Services at Aviano AB, Lajes AB, RAF Alconbury/Upwood Clinic, RAF Lakenheath, Spangdahlem AB, Incirlik AB and Early Intervention Services at Robins AFB and Maxwell AFB.

Element SM.4.2.4 (formerly OPS.7.4.5 and OPS.7.4.6)

EDIS Individualized Program Plans: CONUS (Individualized Family Service Plan [IFSP])/OCONUS (IFSP and Individualized Education Plan [IEP]) and Transition Activities

Evaluation Criteria

Individualized Family Service Plans (CONUS/OCONUS):

- Early intervention services (EIS) listed on the IFSP were provided at locations specified in the IFSP
- The frequency and duration of EIS were provided per the IFSP
- IFSP attendance should include the following persons: 1) parent(s) of the child; 2) or other family members or child care persons, as requested by the parents; 3) advocates or other people outside the family, as requested by the parents; 4) the service coordinator; 5) person(s) involved in conducting the evaluation; or 6) providers delivering services to the family
- Attendance was evidenced by file note or written invitation (with attendance confirmed), IFSP cover sheet with signatures, or minutes
- Included in the IFSP were statements regarding:
 - The child's current developmental levels (must include the following domains: physical, cognitive, communication, social/emotional and adaptive/self-help)
 - Specifics of services (including initiation, intensity, method of service delivery, modifications and revisions)
 - Natural environments in which services are provided
- Evidence of transition support activities for the toddler to preschool or other services
- The location of EIS was based on the needs of the family
- Transportation was provided as needed to ensure access to services

Individualized Education Plans (OCONUS):

- Medically related services (MRS) listed on the IEP were provided at locations specified in the IEP
 - The frequency and duration of MRS services were provided per the IEP
 - Progress toward the annual goals of the IEP was noted in quarterly progress reports and IEP annual reports
 - Transportation was provided as needed to ensure access to services
 - For a student's transition (preschool to elementary, elementary to middle school, middle school to high school, and from high school to the community), MRS should remain as part of the Individualized Education Plan (IEP), as appropriate
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Scoring

4: Criteria met.

- 3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.
- 2: Some, but not all criteria met. Program outcomes may be adversely affected. For example:
 - IFSPs did not address all five of a child's current developmental areas
 - Parents were not presented alternatives for transitioning their child/children from EIS
- 1: Adverse mission impact was expected to occur. For example:
 - IFSPs did not contain all required elements, were not implemented as written, and were not reviewed at least annually
 - Progress notes did not include frequency, intensity, and duration of services provided per IFSP or MRS
 - EIS were not provided based on the family's needs
 - The IFSP did not document transition procedures nor address parental concerns or choices
 - Timelines for transition meetings and activities were not met
 - MRS transition activities were not provided as written on the IEP
- 0: The medical unit failed to meet the minimum provisions of the element. Adverse mission impact occurred or was highly likely to occur.

NA: Not scored.

Protocol	Behavioral Health Protocol 3 is the pertinent protocol for this element.
Inspector Contact	For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty behavioral health inspector.
Reference(s)	DoDI 1342.12, 12 Mar 96; 32 CFR Part 80 (Title 32, Volume 1, Revised 1 Jul 99); ASD (FMP) memorandum, Monitoring the Provision of Early Intervention, Special Education and Related Services at Domestic and Overseas Locations, Standards 7, 8, 9, and 10, 2 Apr 98; 2003 Comprehensive Accreditation Manual for Behavioral Health Care, JCAHO
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Element SM.4.2.5 (formerly OPS.7.4.7)

EDIS Procedural Safeguards and Due Process Entitlements

Evaluation Criteria

Early Intervention Services (EIS):

- Parents were provided information concerning due process rights at each critical juncture (e.g., eligibility evaluation, Individualized Family Service Plan [IFSP], screening by EIS or meeting to review or make changes to the IFSP). Due process entitlements included the rights to:
 - Timely multidisciplinary assessments
 - Appropriate EIS for their child/children and family (if eligible)
 - Refuse evaluations, assessments, and services
 - Written notice to parents before a change (whether made or refused) in the identification, evaluation, or placement of the child, or provision of services to the child or family per the IFSP
 - Confidentiality of personally-identifiable information
 - Review and correct records (if appropriate)
 - An advocate or lawyer in any and all dealings with the EIS system
 - Administrative and judicial processes to resolve complaints

Medically Related Services:

- DoDDS is responsible for the provision of due process and procedural safeguards for all students enrolled and these would be found in documentation in DoDDS records
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Scoring

- 4: Criteria met.
- 3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.
- 2: Some, but not all criteria met. Program outcomes may be adversely affected. For example:
 - Parents were unaware of the right to refuse evaluations, assessments and services
 - Personally identifiable information was not kept confidential
- 1: Few criteria were met. Adverse mission impact was expected to occur. For example:
 - No documentation existed to show discussion of due process entitlements with parents
 - Parents did not receive a copy of due process entitlements at critical junctures
- 0: The medical unit failed to meet the minimum provisions of the element. Adverse mission impact occurred or was highly likely to occur.

NA: Not scored.

Protocol Behavioral Health Protocol 3 is the pertinent protocol for this element.

**Inspector
Contact** For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty behavioral health inspector.

Reference(s) DoDI 1342.12, 12 Mar 96; 32 CFR Part 80 (Title 32, Volume 1, Revised 1 Jul 99); ASD (FMP) memorandum, Monitoring the Provision of Early Intervention, Special Education and Related Services at Domestic and Overseas Locations, Standard 1, 2 Apr 98; 2003 Comprehensive Accreditation Manual for Behavioral Health Care, JCAHO

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Element SM.4.2.6 (formerly OPS.7.4.8)

EDIS Program Management: Quality Assurance, Personnel Development and Data Collection

Evaluation Criteria

Early Intervention Services (EIS):

- Maintained required data collection (e.g., for EIS: number of infants and toddlers served, types of services provided and information required to evaluate the implementation of early intervention programs)
- Trained staff on data management systems

EDIS:

- Demonstrated evidence of self-monitoring/self-studies
 - Documented involvement by the medical treatment facility (MTF) in EDIS performance improvement activities (e.g., MTF/CC signatures on performance improvement minutes)
 - Documented a comprehensive, coordinated approach to training professionals
 - Documented continuing medical education and peer review of records
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Scoring

- 4: Criteria met.
- 3: Deficiencies were minor, primarily administrative in nature, and unlikely to compromise either mission support or patient care.
- 2: Some, but not all criteria met. Program outcomes may be adversely affected. For example, EDIS staff was not involved in process improvement efforts.
- 1: Few criteria met. Adverse mission impact was expected to occur. For example:
- No documentation existed to record a comprehensive, coordinated approach to training professionals
 - No documentation existed for peer review of records
- 0: The medical unit failed to meet the minimum provisions of the element. Adverse mission impact occurred or was highly likely to occur.

NA: Not scored.

Protocol

Behavioral Health Protocol 3 is the pertinent protocol for this element.

Inspector Contact	For assistance interpreting this element, please call DSN 246-1771/2566 and request an Active Duty behavioral health inspector.
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Reference(s)	DoDI 1342.12, 12 Mar 96; 32 CFR Part 80 (Title 32, Volume 1, Revised 1 Jul 99); ASD (FMP) memorandum, Monitoring the Provision of Early Intervention, Special Education and Related Services at Domestic and Overseas Locations, Standard 1, 2 Apr 98; 2003 Comprehensive Accreditation Manual for Behavioral Health Care, JCAHO
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Bases	*EDIS sites: Medically Related Services and Early Intervention Services at Aviano AB, Lajes AB, RAF Alconbury/Upwood Clinic, RAF Lakenheath, Spangdahlem AB and Incirlik AB. Early Intervention Services at Robins AFB and Maxwell AFB.
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